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CONFIRMATION NO. 8351

<b>SERIAL NUMBER</b> 10/810,163	<b>FILING OR 371(c) DATE</b> 03/26/2004 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1642	<b>ATTORNEY DOCKET NO.</b> 2056.029
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**\*\* CONTINUING DATA \*\*\*\*\***  
*See*  
 This application is a CIP of 10/713,642 11/13/2003 which is a CON of 09/727,361 11/29/2000 PAT 6,657,048  
 which is a CIP of 09/415,278 10/08/1999 PAT 6,180,357

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
*None See*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 06/05/2004

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 32	<b>INDEPENDENT CLAIMS</b> 9
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**  
21917

**TITLE**  
Cancerous disease modifying antibodies

<b>FILING FEE RECEIVED</b> 986	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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